

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		43	8/29/01
FORMALITY REVIEW	1a RL	1019 1080	09-24-01 3-220

INDEX OF CLAIMS

Rejected N Non-elected
Allowed I Interference
- (Through numeral) Canceled A Appeal
÷ Restricted O Objected

Claim	Date
1	Final Original 8/29/01
2	✓ =
3	
4	
5	✓ =
6	
7	✓ =
8	
9	
10	
11	
12	
13	
14	✓ =
15	
16	
17	
18	✓ =
19	
20	
21	
22	
23	
24	
25	
26	
27	✓ =
28	✓ =
29	
30	✓ =
31	
32	✓ =
33	✓ =
34	✓ =
35	✓ =
36	
37	
38	✓ =
39	
40	✓ =
41	
42	✓ =
43	✓ =
44	
45	✓ =
46	✓ =
47	✓
48	
49	
50	

Claim	Date
1	Final Original 8/29/01
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	
26	
27	
28	
29	
30	
31	
32	
33	
34	
35	
36	
37	
38	
39	
40	
41	
42	
43	
44	
45	
46	
47	
48	
49	
50	

Claim	Date
1	Final Original
2	110
3	112
4	113
5	114
6	115
7	116
8	117
9	118
10	119
11	110
12	111
13	112
14	113
15	114
16	115
17	116
18	117
19	118
20	119
21	120
22	121
23	122
24	123
25	124
26	125
27	126
28	127
29	128
30	129
31	130
32	131
33	132
34	133
35	134
36	135
37	136
38	137
39	138
40	139
41	140
42	141
43	142
44	143
45	144
46	145
47	146
48	147
49	148
50	149

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

BEST AVAILABLE COPY

826
9/24/01
358
CB/27/01